

# Commonwealth of Virginia Health Benefits Program

## Medco Materials Order Form

**March 2006**

**Please destroy all prior forms**

Pharmacy Materials		Quantity
HD903409	Home Delivery Order Form	
E704	Home Delivery Order Form Envelope	
C1001	Reimbursement Claim Form	
B126461M	State Prescription Drug Brochure – available June 2005 on DHRM Web site	
MG908319	State Three-Tier Drug Program Guide – available June 2005 on DHRM Web site	
MG908372	TLC State Three-Tier Drug Program Guide	

**PLEASE PRINT OR TYPE**

**DATE** \_\_\_\_\_

Agency/Sub-Agency Number \_\_\_\_ / \_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Name (Person Requesting Materials) \_\_\_\_\_

Agency Name \_\_\_\_\_

Shipping Address (Do Not Use P.O. Box\*) \_\_\_\_\_

\*ORDERS CANNOT BE DELIVERED TO P.O. BOX ADDRESS.

City \_\_\_\_\_ VA ZIP \_\_\_\_\_

Send Order Form to [robin\\_scott@medco.com](mailto:robin_scott@medco.com) or Fax to: (803) 779-4689

Materials will be shipped within 48 hours

For Questions About Your Order, Call 1-803-779-1445

Most items, including this order form, are available on the Web at:

[www.dhrm.virginia.gov/compandbenefits.html](http://www.dhrm.virginia.gov/compandbenefits.html)

Charge # for materials (except Three-Tier Drug Brochures): 425000, CWLTHVA  
Charge # for Three-Tier Drug Brochures: 2777, CWLTHVA1